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CONFIRMATION NO. 9016

<b>SERIAL NUMBER</b> 10/598,690	<b>FILING OR 371(c) DATE</b> 09/08/2006 <b>RULE</b>	<b>CLASS</b> 549	<b>GROUP ART UNIT</b> 1625	<b>ATTORNEY DOCKET NO.</b> X16080	
<b>APPLICANTS</b> Howard Barff Broughton, Madrid, SPAIN; Nuria Diaz Buezo, Madrid, SPAIN; Charles Howard Mitch, Columbus, IN; Concepcion Pedregal-Tercero, Madrid, SPAIN;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US05/07052 03/08/2005 which claims benefit of 60/553,187 03/15/2004					
<b>** FOREIGN APPLICATIONS *****</b> EUROPEAN PATENT OFFICE (EPO) 04380057.2 03/12/2004					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/24/2007</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>                    </u> Allowance Examiner's Signature <u>                    </u> Initials <u>                    </u>		<b>STATE OR COUNTRY</b> SPAIN	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 25885					
<b>TITLE</b> Opioid receptor antagonists					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		